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To accredit is to recognize as outstanding, provide with credentials, or vouch that standards have been maintained or met. These statements can be found in most dictionary definitions of the word "accredit." In the U.S., this word has been used to represent a unique process of voluntary, nongovernmental review of educational institutions and professional preparation programs. The process varies from most other countries where quality assessment is a governmental function. Here it has historically been a self-regulating practice of peer review.

The two major types of accreditation in the United States are known as institutional and specialized. In higher education, institutional accreditation is granted by regional and national accrediting commissions which look at entire institutions such as universities or colleges. Specialized accreditation is awarded to professional programs housed within institutions or to free-standing, professional institutes offering training in a particular field of study.

The Council for Accreditation of Counseling and Related Educational Programs (CACREP), a specialized accrediting body recognized by the Council on Postsecondary Accreditation (COPA), was created by the American Counseling Association (ACA) and its membership divisions to provide a nationally-based standards review process for the counseling profession's graduate-level preparation programs. Although independently incorporated in 1981, CACREP views its mission as synonymous with the goals of ACA--to advance the counseling profession through graduate education standards which promote quality education program offerings. CACREP accreditation is seen as a means of strengthening credibility for the counseling profession.

THE ACCREDITATION PROCESS

There are five basic stages to the CACREP accreditation process. Each stage represents a specific level of self and peer review for purposes of constructive feedback regarding a program's compliance with the standards.

In Stage One, a program embarks on a process of self-examination. Program faculty review the program's objectives, curricular offerings, clinical instruction facilities, institutional support, faculty credentials, policies, and other organizational support materials against the requirements embedded in the CACREP Standards. Based upon this self-review process, the program may plan for changes which will increase compliance with the standards.

Following the self review, a program may enter Stage Two of the CACREP process by writing a report which addresses how the program meets each individual standard. Documentation must be provided to support the narrative. Submission of this report with an application form allows for the initial peer review of the program by a subcommittee of the CACREP Board. Feedback is provided to the program, and the program may be requested to either withdraw the application, provide further substantiation, or prepare for Stage Three of the review process--the on-site visit.



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The on-site visit is conducted by a 3-4 person team of professional counselors and/or human development specialists who have been trained by CACREP to validate the self-study data. The typical visit includes: (1) a thorough review of the self-study report; (2) interviews with faculty, students, graduates, deans, clinical supervisors, and other administrators; (3) actual visits to both on-campus and off-campus facilities such as the library, computer centers, practicum and internship sites, and other laboratory or resource centers; and (4) a review of departmental files and supplemental information. A minimum of 2-3 days is reserved for the visit. At the conclusion, the team submits a detailed report of the on-site review to the CACREP Board of Directors. This report is also provided to the program for further feedback and for an opportunity to respond to the relative accuracy of the information contained therein.

Stage Four is the rendering of accreditation decisions by the CACREP Board. Once again a subcommittee of the Board reviews all materials generated in the process to date. The subcommittee prepares recommendations for Board deliberations and decisions. Accreditation decisions are rendered in the following categories:



*Accredited: a status awarded to programs which satisfactorily meet the standards; awarded for a 7-year period.



*Accredited for a 2-year period: a status awarded to programs which substantially meet the requirements for accredited status, but which need to address minor deficiencies. Conditions are attached to the accreditation which must be addressed within a time frame.



*Denied: Denial occurs when the evidence indicates that a program is not in substantial compliance with the standards. The program is notified of the decision through correspondence with the institution's president or other official designee. In the event of denial, a program is given the right to appeal within a 30-day period following receipt of the notification letter.

The final stage of the CACREP process is the submission of interim reports and annual surveys. Their purpose is to document further and continued compliance with the CACREP Standards during the 2-7 years of awarded accreditation. The Board reviews this information and provides continued feedback to the program.

EVALUATION OF CACREP



Program accreditation in counselor education has been the theme of many journal articles. Publications have focused on issues of need for an accreditation program (Stahl & Havens, 1978; Stripling, 1978), concerns generated by increases in program requirements (Cecil & Comas, 1986; Vacc, 1985), faculty characteristics in CACREP programs (Miller & Sampson, 1984), the impact of CACREP's clinical instruction requirements (Pate, 1990; Randolph, 1988), and the governance structure of the CACREP Board as the body responsible for implementing the standards revision process (Engels, 1991; Weinrach, 1991). Research on the relevance of the CACREP Standards (Vacc, 1992) to counselor preparation as judged by representatives from both accredited and nonaccredited programs indicated the existence of a positive degree of content validity of the standards. Additional survey research assessing program representatives' perceptions of whether specific standards hindered the seeking of CACREP accreditation (Bobby & Kandor, 1992) revealed few, if any standards, to be deterrents to achieving accreditation.

CACREP policy also dictates that a comprehensive review of the standards be conducted every 5 years. A committee is appointed to conduct the review which requires dissemination of drafts to its various publics--counselor educators, practitioners, students, and the general public--for comment and suggested revisions. A minimum of two drafts over a period of 2 years are prepared for public review before a final adoption of new or revised standards is completed.

FUTURE TRENDS

CACREP Standards are responsive to the needs of the profession and the needs of our society. In recent years, society has recognized the "graying" of America, been plagued with a growing drug problem, and witnessed crises associated with family violence, divorce, and unemployment. For the profession to remain responsive, appropriate preparation is imperative. CACREP has been in the process of reviewing specialized training standards in areas such as marriage and family counseling, gerontological counseling, and career counseling.

CONCLUSION

CACREP accreditation is a powerful tool for self-evaluation and improvement of counselor education programs. The standards provide the guidelines for master's and doctoral level preparation accepted nationally by the counseling profession. Inherent in the accreditation process is continuous evaluation and responsive feedback so that programs and the profession remain current with the problems faced by entering professionals.

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